Gas Severance Tax

File original of this return only.

Louisiana Department of Revenue

MONTHLY INCAPABLE WELL REPORT

Louisiana Department of Revenue P.O. Box 201 Baton Rouge, LA 70821-0201

PLEASE PRINT OR TYPE.

		Reporting company name							Revenue Account Number						* Method of producing code				
Telephone Signature and Title Date		Reporting company address (including ZIP code)						Reporting Company Number Taxable Period				1-Flowing 2-Gas lift ** Well classification code		3-Pumping 4-Hydraulic lift *** Measurement method codes					
													Dil well	2-Gas well	1-Metered	2-GOR 3	3-SO		
		Field name Producer name Lease and well name	Cert.	Conservation well serial no.	Cont. status code	Parish code	Conservation codes				*** Meas.		** Well	Gross	Net taxable	Taxpayer	 yer		
			code				Field	Producer	Lease	Well no.	method code	of prod.	class	production MCF	volume MCF		er		
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and Titl																			
Signature																			
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